STATEMENT OF ORGANIZATION			20
Name and Address of Committee	2. Oale of this Statement	PAG	
D.R.I.V.M-Democrat, MEpublican, Independent Voter Education	1/14/05	5/0	
25 Louisians Ave, NV	3. Estimated Membership	7 1/2 ×	<u> </u>
Washington, DG 20001	125,000	ļ	
•	d. Recorded Ontonion		
Zhanek It	4. Amended Statement?	Res # 5	+74
lew Committee Northly Filer	Yes <u>≖</u> No	#001135	·
 All Committee Officers and Directors (including Chairperson, Tressure) 	r, il shy, and any other committee	officers and directors)	
s. Name to Position	c. <u>Address</u>		
C. Thomas Keegel Treesurer 25 Lou	distans Ave, NW agton, DC 20001 disions Ave, HW agton, DC 20001		
I. Afficied Organizations	· · · · · · · · · · · · · · · · · · ·		
(Any organization, other than a political committee, which directly or in a. Name to Address	normally established, administers,		
International Brotherhood of Tegesters		e. <u>Relationship to C</u>	enimote.
25 Louisians Ave, WW. Washington, DC 20	001 . Affi	liate	
# Name b. Address		· Vings and loan institution	uns or money market mutual
	reet, NW	Vings and loan ≩nstHullo	uns or money market mutuel
• Name b. Address Wachovia Bank 444 N. Capitol St Washington, DC 20	reet, MW 1901	rings and loan institution	nes or money market mutual
w Name b Address Wachovia Bank 444 N. Capitol St Washington, DC 20 B. FTHIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Ch	reet, MW 1901	mpaign Committee _	
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Wachovia Bank 444 N. Capitel St Washington, DC 20 B. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Ch D. Name of Candidate Dearma Bernett 202/624-6905 b. Daytime Telephone	reet, NN 1001 Mok ons:Principal Ca	mpaign Committee c. Office Sough	Subeldary Committee by the Cancidate at of our knowledge, informat
Wachovia Bank 444 N. Capitol St Washington, DC 20 9. If This Committee supports a single campidate: a. Ch b. Name of Candidate 0. c. Name of Person Propering Report Dearma Bennett 202/624-6905 b. Daytime Telephone 10. WE HEREBY CERTIFY that the Information contained in this STATE and belief.	reet, NN 1001 Mok ons:Principal Ca	mpaign Committee c. Office Sough	Subeldiary Committee I by the Candidate at of our luxawledge, information
Wachovia Bank 444 N. Capitol St Washington, BC 20 B. If THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Ch D. Name of Candidate Dearma Bermett 202/624-6905 b. Daytime Telephone Id. Wit Hisraely Certify that the Information contained in this STATE and belief. This 14th day of January . 2005	Treet, NN 1001 Mok one: Principal Ca	c. Office Sough	Subeldiary Committee by the Condidate CAHAGA CAHAGA CAHAGA CENTER CENTER
Wachovia Bank 444 N. Capitol St Washington, BC 20 B. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Ch b. Name of Candidate 9. c. Name of Person Propering Report Dearma Bermett 202/624-6905 b. Daytime Telephone 10. WE HISREBY CERTIFY that the Information contained in this STATE and belief.	Treet, NN 1001 Mok one: Principal Ca	c. Office Sough	Subeldiary Committee by the Condidate CAHAGE FEB 2
Wachovia Bank 444 N. Capitol St Washington, BC 20 B. If THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Ch b. Name of Candidate Dearma Bermett 202/624-6905 b. Daytime Telephone 10. WE HEREBY CERTIFY that the Information contained in this STATE and belief. This 14th day of January	Treet, NN 1001 Mak one: Principal Ca	c. Office Sough	Subeldary Committee by the Candidate the Candidate CAHACA RECOR

COMMITTEES WITH OVER 250 MEMBERS

The following certification is OPTIONAL and should be completed ONLY if it is explicable to your committee. Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political

11. WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members as of December 31 of the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION. We further certify that at least two hundred fifty (250) of the members of this political committee contributed at least fifty dollars (\$50.00) to this committee during the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION.

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- 10 To			
This 19 day of Jan 05			
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James P. Atthe	1		
Signature of Cognititée Chairperson	Daytima Telephorie Number		
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Signature of Committee Trellaurer, if any			
Signature of Committee Trellauter, if any	Daytime Telephone Number		
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INSTRUCTIONS READ ALL INSTRUCTIONS CAREFULLY. PRINT OR TYPE ALL INFORMATION LEGIBLY IN BLACK INK.

- A \$100 filing fee must accompany the Statement of Organization. The fee should be paid with a committee check payable to "Campaign Finance."
- This form must be filed every year between January 1 and January 31, subject to the following If a committee organizes after January 31, then this form must be filed withing 10 days of the date
 - of organization, If the committee organizes within 10 days prior to an election, then this form must be filed within
 - 3 days of the date of organization.
 - If the committee does not anticipate that it will have over \$500 in total financial activity for a particular calendar year, it is not required to file this form for that year. If it determines later in that year that it will exceed \$500 in total financial activity, then this form must then be filed within 10 days.
- A Certificate of Registration will be issued to each properly organized committee.
- A committee that has over \$500 of financial activity in a calendar year and does not file a Statement of Organization is subject to fines.
- Mail or hand deliver the Statement of Organization along with the required fee to:

CAMPAIGN FINANCE 2415 Quali Drive, 3rd Floor Baton Rouge, Louisiana 70808